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Scotia Plaza, 40 King Street West, 40th Floor
Toronto, Ontario, Canada M5H 3Y2
t: 416 364 7311 f: 416 361 1398

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TO: U.S. Patent & Trademark Office

ATT'N: Brian Yong S. Kwon - Examiner, Art Unit No. 1614

FAX NO.: 703-872-9306 **TEL No.:** 571-272-0581

FROM: Anita Nador

DATE: August 12, 2004 **PAGES:** 6
(Including cover sheet)

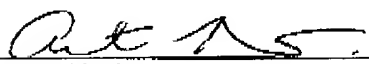
File No.: 6704-268
Lawyer No.: 217

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Re: ADAMSON et al.
Serial No. 09/926,167
Filed: January 8, 2002
For: Hemoglobin-Antioxidant Conjugates
Docket Number: 6704-268

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the attached cover letter, Notice of Appeal (2 copies) and Petition for 3-month Extension of Time to reply to the office action mailed February 12, 2004 and Advisory Action mailed July 6, 2004 (2 copies) are being facsimile transmitted to the U.S. Patent & Trademark Office on the date shown below


Anita Nador
Registration No. 47,366

August 12, 2004
Date

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ADAMSON et al

Atty. Ref.: 6704-268

Serial No. 09/926,167

Group: 1614

Filed: January 8, 2002

Examiner: Kwon, Brian Yong S

For: Hemoglobin-Antioxidant Conjugates

* * * * *

August 12, 2004

Assistant Commissioner for Patents
Washington, DC 20231Notice of Appeal and Petition For Extension of Time

Sir:

Please find enclosed Two (2) copies of the Notice of Appeal, appealing the decision of the Examiner of February 12, 2004 and the advisory action dated July 6, 2004 of twice rejected claims 1-4, 7,8, 10-24, and 36-45 and twice objected to claims 36-41. Two (2) copies of a Petition For Extension of Time Under 37 CFR 1.136 (a) are also enclosed. The Directors is hereby authorized to charge any fees that may be required (including any notice of appeal and extension of time fees) or credit any overpayment, to Bereskin & Parr's Deposit Account Number 022095.

Respectfully submitted,

ADAMSON et al.

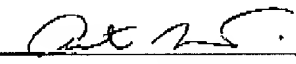
By: Anita Nador, Bereskin & Parr
Reg. No. 47,366*Please send all correspondence to the Toronto office:*Scotia Plaza, 40 King St. West, 40th Floor,
Toronto, Ontario, Canada M5H 3Y2
Tel: 416.364.7311 Fax: 416.361.13982000 Argentia Rd., Plaza 4, Ste. 430,
Mississauga, Ontario, Canada L5N 1W1
Tel: 905.812.3600 Fax: 905.814.0031Waterloo Technology Campus, 408 Albert St., Ste. 2,
Waterloo, Ontario, Canada N2L 3V3
Tel: 519.783.3210 Fax: 519.783.3211www.bereskinparr.com

PTO/SB/31 (06-04)

Approved for use through 07/31/2006. OMB 0851-0031

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 6704-268	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ Signature _____ Typed or printed name <u>Anita Nador</u>		In re Application of ADAMSON et al.	
		Application Number 09/926,167	Filed January 8, 2002
		For Hemoglobin-Antioxidant Conjugates	
		Art Unit 1614	Examiner Kwon, Brian Yong S
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00.			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 165.00.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
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I am the			
<input type="checkbox"/> applicant/inventor.		Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		Anita Nador Typed or printed name	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>47 388</u>		(416)-364-7311 Telephone number	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		August 12, 2004 Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			

☒ *Total of 2 forms are submitted.

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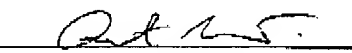
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Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ 330.00. <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: </div> <div style="text-align: right;">\$ 165.00.</div> </div> <div style="margin-top: 5px;"> <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-2095. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. </div> <p style="margin-top: 10px;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>47,386</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ </div> <div style="width: 35%; text-align: center;">  _____ Signature Anita Nador _____ Typed or printed name (416)-364-7311 _____ Telephone number August 12, 2004 _____ Date </div> </div> <p style="margin-top: 10px; font-size: small;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>						

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